

FEE TRANSMITTAL

Application Number 10/734,829
Filing Date December 12, 2003
Inventor(s) David L. Brown et al.
Examiner Name Zinna Northington Davis
Attorney Docket Number PHA 4174.4 (3480/3)

Art Unit 1624
Confirmation No. 5321



Applicant claims small entity status.

METHOD OF PAYMENT

The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

FEE CALCULATION

1. **BASIC FILING, SEARCH AND EXAMINATION FEES**
(Type: _____) Subtotal (1) \$ _____

2. **EXCESS CLAIM FEES**

Total Claims _____ - _____ (HP) = _____ x Fee _____ = \$ _____
Indep. Claims _____ - _____ (HP) = _____ x Fee _____ = \$ _____
Multiple Dependent Claims Fee _____ \$ _____
(HP = highest number of claims paid for)

Subtotal (2) \$ _____

3. **APPLICATION SIZE FEE**

Total Pages _____ - 100 = _____ ÷ 50 = _____ x \$250 = \$ _____
(Application + Drawings) (round up to whole #)

Subtotal (3) \$ _____

4. **OTHER FEE(S)**

Two month extension of time
 Information disclosure statement
 37 CFR 1.17(q) processing fee
 Non-English specification
 Notice of Appeal
 Filing a brief in support of appeal
 Request for oral hearing
 Other: _____

Subtotal (4) \$ 450.00

TOTAL AMOUNT OF PAYMENT \$ 450.00

Bradley S. Schammel
Bradley S. Schammel, Reg. No. 54,667
Telephone: 314-231-5400

3/25/05

Date

BSS/skd
Express Mail Label No. EV 453252055 US

1 03/29/2005 HTECKLU1 00000010 10734829
01 FC:1252

450.00 0P